# Participant Directed Programs Policy Collaborative Meeting February 26, 2020 Draft Stakeholder Notes

## **Executive Summary:**

We discussed EVV coming in July for CDASS, requested FMS agencies demonstrate their system to us in April. We discussed the co-chair positions and endeavor to vote in June. We got updates from HCPF on positions and the survey. We discussed a budget request from HCPF for more utilization management for our programs and heard why CCDC opposed that request. We have a new way to take attendance making use of good technology.

The meeting was called to order at 1:00.

**Attendance**: The new attendance form was shared. This is an online form for everyone who has access to the internet to document their attendance. Gerrie mentioned that there is no category for interested persons (not a client, case manager, provider, FMS, etc.) and John said one would be added. We determined we would add a line for advocates. People without email reported their presence. Voting rights were established.

**November minutes:** Maria said she did not get the packet and asked that we defer until voting on them until she can get it. The packet was sent on 2/14. We will vote on it next month.

## Open Forum #1:

- Robin Bolduc What happens if an AR dies? Julie shared what happened when Carrie Lucas died and she was AR for her two adult daughters. In that case, people were allowed to bill for her daughters while the new AR was put in place. In that case there was an available AR. This will not always be the case. We need a protocol. People are not thinking about this in time. Erin said there was a time when we started talking about AR issues, both this and what to do if someone wants to get rid of an AR. It was decided that a subcommittee will be formed. Case manager and FMS need to know what to do. Robin will participate and John will ask others. Alison with Consumer Direction is interested.
- Renee: Can we get contact info for all FMS representatives at this meeting? Yes That will be sent to the group.
- Julie: FMS change notification will be dealt with at 2<sup>nd</sup> open forum

## **Board of Nursing Check Issue:**

Erin Thatcher opened the discussion. She said she had received requests for time to discuss an issue regarding the board of nursing checks. People who have had a license revocation cannot work for CDASS clients. The FMS is required to do a check with the Board of Nursing before approving employment.

Douglas Howey, a client/employer relayed the following experience: Douglas had an aide working for him and it seemed to go well and she wanted more hours. Kelly Tobin, a member of our group, was going to hire her. The attendant did the paperwork with Acumen and Kelly learned the person had a bad background check and nursing board violation. This should have been caught by PPL when she was hired in 2012. They said it was fine. The issue occurred before 2012. This was a problem for Douglas and the worker. Douglas called PPL and was told that they do not care about background checks and nursing checks and there is no problem. Kelly said she was also directly impacted and thought that she hired someone who was approved in the queue.

Erin thanked them for bringing this to attention. Erin wanted PPL to respond.

Mark thought if there was background check the client made a decision unless it was a barrier crime. Is there provision in rules to prevent this? This is true for background check but not for board of nursing.

Mark said that Colorado background checks are useless if they are only done for Colorado and we need to be able to have national checks.

Matt from PPL gave this response: Safety is one of our top priorities. We do various background checks. We are still reviewing his (Douglas's) account and he will get a formal response. Matt said that this situation opened up additional conversations that are warranted re board of nursing checks. This included the fact that the information about what FMS can use is vague like name and city, there could be times when it might be hard to identify if the person is the same person. Matt said that they have contact at DORA they are working with to make sure the person is the right person and open conversations about this to enhance the process so it does not occur again. Douglas thanked him for the explanation and shared that his email detailing the situation was sent on 1/29 so there was concern that this has not been completely investigated and responded to by the end of February.

Erin said that this requirement is part of the law and cited the regulation 8.510.8.G which state attendants shall not have had license as RN or CNA revoked or suspended. Whether we hire people who have convictions of other crimes are up to the client (except for barrier crimes which are the most serious). People have recourse if they lose their license.

Allison from consumer direct clarified that we are talking about the board of nursing check which is different than the criminal background check. There is no flexibility re BON check like there is with criminal background check in terms of hiring. If the person lost their license or had it suspended they cannot work.

Robin said she was on that committee for years and that the Board of Nursing does not revoke licenses for minor infractions. She agrees with HCPF on making this rigid because revocations are usually due to abuse. Kelly said it was a very serious issue.

Kirk asked if this was in Denver or CO Springs and Douglas clarified that this was in Denver

Maria has hired people who had records that did not show during the background check but she learned about it after the fact. She feels people need more information.

Matt said they tell people about background check information that they receive and clients can do what they want with it. He said that communication on this case was quick and that PPL came to the table quickly and is still investigating this as of the date of this meeting February 26th.

Julie said that other FMS companies have a form attesting that the nursing license is not revoked.

Matt said that they are doing investigation and taking this seriously. He said that the conversation Douglas had with a PPL employee is concerning. Apparently, the PPL person said this worker is not a nurse, they are a home care aid was inappropriate.

Matt said that the call Douglas reported did not meet their standards and they (PPL) worked with that agent and all agents. Douglas asked three times to talk to a supervisor and was demeaned and told a supervisor was right there. Erin said they (HCPF) shares concerns about the call after reviewing a transcript. Erin wanted to bring this to PDPPC because she wants to know if there is something we can do collectively to improve the process for people trying to be employers and employees.

# **Co Chair Discussion Continued**

A draft was sent out for the January meeting about requirements for Co-Chairs. These requirements were read and we discussed the voting process. There are some questions that the group needs to answer.

- 1)Discussed voting process
- 2)Do they have to be a participant or can be they an AR?
- 3) Should it be two or four year term?

- 4) Should we continue to have a co-chair one on CDASS and one on IHSS?
- 5) Should there be term limits (they recommend no)

The goal is to schedule a vote by June of 2020 for CDASS and open for nominations a month ahead of time. People who are interested should submit letter of interest people can read for voting

At the last meeting PDPPC members were told to get in touch with either Kevin or Curt with thoughts about the co-chair positions, roles, requirements. No one responded so they came up with the proposal. John will send out what they read (again).

## **Electronic Visit Verification: EVV LANA EGGERS**

August 3<sup>rd</sup> is the date to require all providers to use EVV

This means on that date it is a requirement of being a provider you must comply.

They will not start denying claims on that day —there is an element of claims integration to be figured out which is why they allow for softer launch before there is any impact on claims. They will be doing a post payment review process. If someone is making earnest effort they will not be reviewed. Beginning January 01 claims not on EVV will deny.

For CDASS, HCPF is requesting FMS' have systems operational by July 01 to be in compliance by August 3 so we have time to practice. Other than that CDASS is using the same timeline.

#### **Ouestions**

- If client and attendant are in different locations is this a problem? For example, if the client gets their morning care, then left and the aid stays and does homemaking for another half hour. Lana said this does not matter. There are no restrictions on location of service delivery. The attendant clocks in and clocks out as they provide services. The client/AR does not have to approve at that time. We can still approve at the end of the pay period, weekly or whenever.
- Lana said that FMS vendors have to have things in order before other providers. Lana reiterated that there is no requirement to have the employer or AR verify at the same time
- Mark asked where do we send a reasonable accommodation request for someone that cannot remember to clock in or out? The answer is that it should go to both the FMS and HCPF.
- Julie asked for FMS vendors to demo this in April at our meeting. She said we need to know what each system looks like so we can make a choice before June,

- which is our next time to change FMS vendors. It was said that they might not be ready.
- Robin said that all FMS' are national companies and they all have apps in other states. How can they not know what they are doing or have something to show, even if it may have to be tweaked further for Colorado between now and July. She said that we need to see what they are doing in March or April. She said we want to know for each FMS and each agency, are biometrics used even if not collected? She said we also need to know from each FMS and each agency are caregivers exempted? Robin said people can make choices and this need for info is for CDASS, Agencies, and IHSS. All of them should tell people things like they do use geo tracking, exempt caregivers, etc. We want a list of agencies that will exempt caregivers.
- HCPF sent a survey asking about exempting live in caregivers. 70% intend to exempt, 7 % intend to collect and 21% undecided and all three FMS will exempt live ins.

Lana said that they are reviewing the rule to put in front of us and some of the adjustments made include:

- No biometric
- No visit data with continual GPS only location at beginning or end
- No geo fencing to restrict access

Does Acumen app use biometrics? Gabrielle said Acumen supports us previewing the app. She said they have it as option now but it will not be there when the Colorado app is rolled out.

There was a discussion about banning use of biometrics, geo-fencing, and continual GPS as well as disclosing. People should submit comments as the rule goes to MSB in May.

Lana said that HCPF can only say that they do not recommend or condone things like biometrics, because they cannot enforce a ban. Lana said she can see if they can issue guidance on the Department stance that these should not be used.

Maria asked if workers can call in from the community location or her home? She said that she has been told it has to be from her telephone and has been told different things. She said her caregivers are resisting EVV—some quotes

"They will need to pay me triple time if I have to clock in and out"

"They have not said anything to me so do not feel I have to take part"

"It will be harder to get employees"

"It will mean more time without pay."

She said she feels already overburdened and receives no compensation and feels it adds liability.

There was a discussion of what is associated with a phone number and Lana said that any phone can be used if the location assumed is incorrect they just have to do something (like push a button??) and that the state rules allow call in and call out from any phone number.

Renee wanted to know about the change to having 3 rates and calling everything CDASS (as opposed to homemaker, health maintenance, personal care) and when will that happen? She does not want to change rates more than once. Katie McGuire said this is known as the down-streaming of rates. This is part of the go live and needs to be done by July, but some may have it done earlier.

Someone said that we need to know ahead of time and not be in the last minute situation regarding learning these systems. It was asked "What if any FMS does not have a system up and running?" We asked if HCPF would prevent them from taking on new clients? HCPF did not really have an answer other than that they hoped the FMS's would comply with their timeline.

Curt reminded everyone that CDASS clients have to explain to employees how it worksthere is no "they" as we the clients/employers/ARs are responsible for communicating to our workers.

Someone asked if we can put requirements about limiting collection of data in the next FMS RFP?

Maria wants to hear more about liability in future meetings

## **PDPPC Workplan: Erin**

The spreadsheet came from a discussion we had at this meeting. People should look at the document and we can discuss what else needs to go on it. She said that someone should take ownership of the document.

Other activities of late include:

She posted announcements for the positions for contract management and IHSS and will look for stakeholder participation for IHSS interviews.

Katie received the PDPPC recommendation and the HCPF response was sent out.

There were no further questions or comments

## **2020 Consumer Direct Surveys**

They decided to wait until Spring to send out survey since we had two new FMS with less than a year of experience. If anyone has comments on the surveys call or email John Barry 303-866-3173 <u>John.r.barry@state.co.us</u>.

Curt asked is there a way to rate them on the quality of their EVV app? This has not happened yet but perhaps we could ask "how is it working for you?" Katie asked for Curt to send her an email about wording. They are sending info about open enrollment when this is sent out. They are also sending out information inviting people to participate in PDPPC.

## **Budget Request R 13**

Erin said that we missed our meeting in December and this got missed in terms of bringing it to PDPPC. Every year HCPF puts together a request that is submitted to the general assembly for consideration. Erin read the paragraph that was submitted for utilization management for Long Term Care. It was to have an outside vendor review the allocations for all health maintenance requests for CDASS and IHSS.

Julie shared why CCDC is opposed which included logistics and the cases that are reviewed now are not getting processed in time leaving clients without allocations. She explained that people with very high allocations have to be reviewed, and this is fine but since they cannot even manage that small caseload, she is worried how they will be able to manage a much larger caseload. She said disruption and problems with large SEP agencies was part of the problem. She also said these services in CDASS are non-medical and having a medical review makes no sense.

Gerrie asked for all to get a copy of what Erin read and what CCDC sent out and John said he would send this.

Linda said that it would be good to identify our understanding of what is and is not supposed to be run by PDPPC and would like it on the agenda for the next meeting.

Mark said that many years ago there was a UM company called CFMC (Colorado Foundation for Medical Care) that used a medical perspective for approving care and eligibility. He recalled that it was a nightmare for clients. He said there were arbitrary terminations, waiting 9 months, etc. The result was people ending up in nursing homes. He said that using outside UM is alarming and shows we have not learned from past mistakes.

Curt said he had a concern that they are looking at saving money not the need. He said that SEPs do not always grasp the CDASS program—this is adding another layer, and agrees to stand with CCDC opposing this, not against cost containment but

because this is not a good way to manage costs. He suggested instead we need to properly train and pay case managers to do the job.

## Open Forum #2:

- Julie had wanted to talk about open enrollment and a concern that no one knows when it is or is ever reminded. She is glad that notice will go out with the survey and said it needs to be about a month before changes need to happen to give time for everything to happen.
- Kitten had a question about an appeals meeting. This is another HCPF stakeholder meeting about the appeals process.
- John said our next meeting will be March 25 at the Community First Foundation in Arvada.
- Kirk asked does the county really need to have a full itemized bank statement for eligibility? Julie said if you are not on buy in but you can block out what you spend money on but you have to report all income and total assets. if you are on buy-in you do not need to report assets. Mark said the state has access to a database so they should know your assets.

The meeting adjourned around 4:00 PM

Respectfully submitted

Julie Reiskin